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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/587,775-Conf. #5202
				Filing Date	June 10, 2008
				First Named Inventor	Joacim Elmen
				Art Unit	N/A
				Examiner Name	Not Yet Assigned
				Attorney Docket Number	66015(45120)
Sheet	2	of	2		

[illegible]

Examiner Signature	/Jon Angell/	Date Considered	03/01/2011
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.